### ARIZONA STATE VETERINARY MEDICAL EXAMINING BOARD

1740 W. Adams St., suite 4600, Phoenix, Arizona 85007 Phone (602) 364-1PET (1738) FAX (602) 364-1039 VETBOARD.AZ.GOV

## COMPLAINT INVESTIGATION FORM

If there is an issue with more than one veterinarian please file a separate Complaint Investigation Form for each veterinarian

## PLEASE PRINT OR TYPE

	FOR OFFICE USE ONLY				
	Date Received: April 1, 2019 Case Number: 19-67				
, A	TUIS COAADI AINIT IS EU ED A CAINIST THE FOLLOWING:				
A.	Name of Veterinarian/CVI: Lori Hehn and Kelly Hehn				
Premise Name: Canyon Animal Hospital					
	Premise Address: 15411 North 31st St				
	City: Phoenix State: AZ Zip Code: 85032				
	Telephone: (602) 971-9651				
B. INFORMATION REGARDING THE INDIVIDUAL FILING COMPLAINT*:					
	Name: Karin Ashley				
Address:					
	City: State: Zip Code:				
	Home Telephone: Cell Telephone:				

<sup>\*</sup>STATE LAW REQUIRES WE HAVE TO DISCLOSE YOUR NAME UNLESS WE CAN SHOW THAT DISCLOSURE WILL RESULT IN SUBSTANTIAL HARM TO YOU, SOMEONE ELSE OR THE PUBLIC PER A.R.S. § 41-1010. IF YOU HAVE REASON TO BELIEVE THAT SUBSTANTIAL HARM WILL RESULT IN DISCLOSURE OF YOUR NAME PLEASE PROVIDE COPIES OF RESTRAINING ORDERS OR OTHER DOCUMENTATION.

С	PATIENT INFORMATION (1):  Name: Toby  Breed/Species: Maltese			
	•		Color: White	
			,	
	Age:	Sex:	Color:	
D.	Please provide to Lori Hehn Kelly Hehn  WITNESS INFORMAT Please provide the	TION: ne name, address and ne name, address and re regarding this case.	ARE TO THIS PET FOR THIS ISSUE: phone number for each veterinarian.  phone number of each witness that has	
	Attesta	tion of Person Rec	juesting Investigation	
and	d accurate to the	e best of my knowled al records or inforn	nformation contained herein is true lge. Further, I authorize the release of nation necessary to complete the	
	Signature:			
	Date:			

This complaint is a long time coming. I'm not typical someone who files complaints against people, however, I feel compelled to protect other pet owners from this vet office. Incidient #1: I had Toby's teeth cleaned a few months ago. The previous cleaning had also been by Kelly Hahn and removal of some teeth, which was about 2.5 years ago. At that time, Toby's front incisor was kept and I was told dental cement was used to keep it intact. However, it was then sticking out of the front of my dogs mouth so badly that his bite was affected because the position of the tooth and had cause misalignment in his little mouth. When I took Toby back for a cleaning a few months ago and explained to Lori Hehn that Toby's jaw was affected by what they had done and that his right jaw was tender and that he kept opening and closing his mouth seemingly because his jaw hurt, Lori was very defensive and claimed no dental cement was used on him. I had been told by Kelly Hehn that dental cement had not only been used on this front tooth but on other teeth inside his mouth. Lori was very defensive and "fasttalking" and aggressive in her response about the tooth and provided no examination of Toby's jaw or any response otherwise. Of course, most people, including myself, will ignore our thoughts, intuition and experiential facts in the presence of those who are "Doctors". This is the reason I did not question this at the time. Lori had a "fasttalking/talk over you" sort of answer that covered any responsibility on her's or Kelly's end. So, I acquiesced. Incident #2: In late February of this year, Toby seemed to be experiencing some back pain. I took him in to see Lori and she put him on muscle relaxants, pain medication and anti-inflammatories for 10 days. A few days after I stopped the medications. I came home from the grocery store about 10 am on the morning of 3/26/2019 and Toby was covered in diahrea and pools of blood and tissue were flowing out of his bottom. I cleaned him up and followed POOLS of blood onto the sofa, down the hallway and into the back patio where I found diahrea, tissue and more pools of blood. I then called Canyon Animal Hospital panicking at this display. They said they were not able to see me until 4:45 and even then I'll have to wait. I was told that Lori had 6 surgeries to attend to and could not see me until then. I told the girl that I would come in, but in the meantime "what should i do!" "Should I take him to the hospital, how bad is this in their experience. I'm concerned about waiting 6 hours to see Lori so should I take him somewhere else?" By now I'm crying as I've never seen anything like this in any animal I've ever had. The girl seemed distracted or confused. I asked again if I should go ahead and take him to the hospital and in the meantime, could she have Lori call me when she had a chance. And, which hospital would she recommend I take him. She still seemed distracted and would not answer the question and respond to my concerns. It appeared that someone else was talking to her while she was on the phone. Then, she repeated that Lori had 6 surgeries and would not be able to see me. It was like we were not having the same conversation. After asking her four times if I should take him to the hospital and, if so, where should I take him still with no solution but excuses about why Lori couldn't see me until 4:45, I raised my voice in frustration as anyone would who was not receiving answers to questions and speaking to someone who was not completely paying attention to my concerns and who had no human compassion for my dog. When I raised my voice, I again asked where I should take him and said to her that she was not addressing my problem with solutions but only excuses. And, that I don't want to hear again how many surgeries Lori had today but where I should take my dog to get care now. She finally told me where to take him at

which point I asked her to ask Lori to call me when she had time between now and my appointment. About ten minutes later, Lori called me. She was very aggressive toward me and angry (all this during a time that I thought my beloved Toby was dying!) which is that very last thing a person needs during a time like this. Lori repeated all the things (aggressively) that the receptionist had said: I have 6 surgeries today and can't see him until later. I told her I got that and that the question is should I just take him to the hospital. At no time did she show ANY concern or consolation about the condition of my little dog. Didn't ask any questions about his demeanor, the blood and tissue or say "I understand your concern". Her answer (aggressively-in a way that made me feel like I was bothering her by my situation) was "if it will make you feel better, you should take him to the hospital". That's fair, however, there was zero questions about my dog and zero concern other than for herself and her hectic schedule. Then, she began screaming at me about how I spoke to her receptionist. And, I mean screaming. When I tried to defend my comments, she just screamed louder and said that she was standing right there and heard me raise my voice. So, this is the reason the receptionist was not paying attention to me. Because Lori was standing there telling her "No, I have 6 surgeries today and more. So, the receptionist lied to me that Lori was in surgery and couldn't talk to me. Lori continued to scream at me and I told I just won't come in again. She said "great!" I then had my records sent over the another vet and Toby is fine. I believe Kelly Hehn hurt my dog by using dental cement on his front tooth and causing a jaw issue and I believe Lori Hehn hurt my dog by prescribing medications that causes severe bleeding in his colon. Toby had no tumors and all of his blood work is perfect. His fecal labs showed no parasites, all which leads me to believe that Lori's treatment of muscle relaxants, pain meds and antibiotics led to injuring my dog and causing my dog and myself undue mental and emotional anguish. I paid over \$700 for exrays and labs as a result and I want something done about the abuse of my little boy.

Please allow this email to serve as my official signature of complaint submission. I look forward to having this situation resolved.

Thank You Karin L Ashley

RECEIVED

APR 1 5 2019

BY:

April 3, 2019

Reference number 19-67

To Whom it Concerns,

Thank you for allowing me to respond to the allegations made by Mrs. Karin Ashley regarding her dog Toby.

First, I will address the beginning of her letter regarding Toby's dental care. We do not use or even have dental cement, so that is a false statement. When Toby came in for dental cleaning on 1/21/19 his lower right canine tooth (not an incisor) was recessed and sticking out slightly (loose) and she was concerned about the jaw and that whatever we had done previously must have caused a problem (because the tooth was protruding, she perceived that the jaw was misaligned). I had explained to her at that time that at Toby's dental previously (4/18/17- which was a whole 2 years prior) Dr. Kelly Hehn had used some Doxirobe antibiotic gel which I think is what she is referring to as cement, which is used under the gumline, and the gel itself did not make this tooth stick out like it is now (2 years later) but was just an antibiotic to help. She understood that when I explained it (see medical records) but now she is saying otherwise in her letter. I even showed her how the tooth was working its way out of the jaw because it is just a bad tooth that has progressed and it would just need to be extracted now. I had her look at both of the canines for comparison, so that she could see that the one was just coming out. There was not a problem with the actual jaw and there was no pain or misalignment on exam, just the tooth. She was ok with that. And it was just a normal exam and dental check-in, never was I "fast-talking and aggressive." I literally looked at his mouth and jaw in the exam room and I showed her the tooth in the room so to say that I never checked it is absolutely false. I was never defensive as there was nothing to be defensive about. And Toby had a routine dental cleaning that morning and the tooth was extracted and he did great. He was on Clavamox and Carprofen following the dental, no side effects were reported for these medications at that time.

Fast forward, I saw Toby on 3/4/19 because he was having back pain. He was hunched over and always laying on his side she said. On his examination, he was painful at the T-13-L1 junction in his spine. I was concerned that he may have a pinched nerve or disc issue at that location in his back. He had no neurological deficits. I told her to make sure that he does not jump off furniture anymore, and I put him on Methocarbamol for his tense muscles and Carprofen for pain and inflammation (which he had previously at the time of his dental with no problems reported). During this exam I had even commented about how good his teeth looked and he had no issues with his mouth. I prescribed Carprofen 25mg- ¼ of a tablet every 12 hours for pain and inflammation (only a 6.25 mg dose) with a quantity of 7. This would have lasted him 14 days total starting on 3/6/19. I had her start it 2 days later because she had given him baby aspirin the day prior on her own and I did not want to mix medication, and I told her not to give anymore aspirin. The examination was on 3/4/19 starting Carprofen on 3/6/19, which was reflected on the drug label. This means that the Carprofen medication would have been finished on 3/20/19 at the latest. Then she called because Toby was having blood from his rectum on 3/26/19. This is 6 days after he would have already finished the medication. It is very unlikely that the Carprofen caused the acute onset of this type of severe frank blood from the rectum as she is describing 6 days after the medication was already finished. Furthermore, this is a very conservative approach to back pain and at a very reasonable and safe dose (he was 8.4 pounds); even less than the standard dose recommended at 2.2 mg/kg twice daily. Toby had recent labwork, and there was no reason that I should

not provide an anti-inflammatory pain medication at this conservative for him when he was clearly in pain. No antibiotics were prescribed at that visit, that is a false statement as well she makes at the end of her letter.

Mrs. Ashley called the morning of 3/26/19. Jessica was on the phone outside of the surgery room and I could hear the conversation going on with a client. She put the client on hold and then she came to let me know what was going on and asked when we could work Toby in for an appointment. The soonest I could get him in would be in the later afternoon because I was already double booked with other emergencies early afternoon. She got back on the phone and I could hear the client raising their voice during their conversation even from where I was at. Jessica said everything very calm and appropriate to Mrs. Ashley. I did hear her inquire about if he was eating and drinking ok, how was he acting now, etc. which are normal and appropriate things to inquire about. She did tell her that we were in the middle of surgeries (she never said 6 surgeries—we never have more than 3 surgeries in a morning so that is also a false statement. I had told Jessica that if she is unable to wait that long for Toby to be seen and if the owner is concerned and if it seems like a life-threatening emergency have her go to Phoenix Veterinary Referral now and that is what Jessica told her. She told her that she did not know when I would be available to call her back and that she just should go to emergency now.

I called Mrs. Ashley back to touch base when I was able and she explained about Toby having the blood from his hind end when she got home from the grocery store (see medical record for client communication); she was still at home and had not gone to the ER as recommended (in her letter she said she thought he was dying). I was absolutely compassionate when I was talking to her at that time. I actually told her that I was sorry that I would not be able to see her right then, but if there is that much blood, then yes, I would take him to emergency as Jessica had recommended because it is difficult to tell over the phone if it just colitis or something more serious and that if here is that much blood as she described, I am concerned about it and should be seen sooner than the afternoon when I would be available. She agreed with that and that was ok with her it seemed and the conversation was fine up to that moment, there was never any ill will or anger or anything at all to that point on either end. It was a normal and calm conversation.

Then it took a turn for the worse when I told her that I did need to bring up one more thing and that I had heard her raising her voice to Jessica on the phone earlier and she said yes, and I told her that she cannot do that to our technicians. If she continues to come to our hospital, that she needs to be kind and not raise her voice/yell like that at our staff. Her demeanor completely changed. I know that when a pet is sick an owner is often very worried and their emotions can make them act in a way that they normally would not. I fully thought she would just apologize for yelling. But instead she said, now hold on a minute and went on to say that Jessica was giving her "every excuse in the book" and acting like a "typical millennial" (exact words) and was raising her voice to me now about it, so she was the one that was raising her voice first. I was actually shocked by her vitriol towards our staff in the things that she was saying which were out of line. She doesn't know anything about Jessica and to say these types of things about her was uncalled for and crossed a line. I told her that I had overheard Jessica talking to her and never was she disrespectful or said anything that I did not ask her to say when she was communicating with me about Toby. I was not aggressive toward her, but I did have a firm tone with her regarding her accusations and what she was saying was not true. She said, "Well maybe I just won't come back there," and I had already realized by that time that this is not a client that we would be able to work with any longer and I said, "you know, that would be great," and yes that was in a raised voice.

But her other allegations are either false or extremely dramatized regarding the entire conversation. We later received a call from another animal hospital and we forwarded records to them.

I am very glad that Toby is doing well and that is my primary concern regarding this whole situation. We are willing to work with anyone and we really try to be accommodating. I will always defend our staff anytime a client yells at them or tries to say negative things about them that I know are untrue. Jessica has been at our hospital for years even before we bought the practice. She is very calm and I have never once heard her be disrespectful to our clients. You can see by our reviews that we do not treat our clients or patients the way that Mrs. Ashley is alleging. I think that Mrs. Ashley was upset that I called her out on her behavior and she didn't like it.

My only concern at this point is that Toby received treatment and he is doing well and that he has another veterinarian that can take care of him. None of the things that Mrs. Ashley is alleging were ever discussed with us that she thought something we had done had hurt Toby. And her concern about the tooth was addressed in January as you can see by the medical record. This is all coming up after I had asked her not to yell at the staff, which is the ironic part. If she thought we were such terrible veterinarians all along and that her letter was a "long time coming" then why did she continue to come to us for care for 3 years? And then to say at the end that she has mental anguish when she also stated just before that Toby had perfect labs, x-rays, and fecal tests, etc. at another hospital and that he was fine then and is doing great now to me does not make any sense, trying to place blame upon us for "abuse of her little boy." The letter she wrote is clearly a reflection of her character and I will say nothing more regarding that. After reading this letter I feel nothing but relief that she can never return to our hospital. It is clear that the letter Mrs. Ashley wrote is emotional, but the main point is that we have not done anything to harm Toby and have always taken good care of him. I am very happy that she did find another veterinarian that can help Toby and I truly do wish her all the best.

Please feel free to call me to discuss further if necessary, regarding this matter,

Lori J. Hehn, DVM

Canyon Animal Hospital

602-971-9651



VICTORIA WHITMORE
- EXECUTIVE DIRECTOR -

### ARIZONA STATE VETERINARY MEDICAL EXAMINING BOARD

1740 W. ADAMS STREET, STE. 4600, PHOENIX, ARIZONA 85007 PHONE (602) 364-1-PET (1738) • FAX (602) 364-1039 VETBOARD.AZ.GOV

## **INVESTIGATIVE COMMITTEE REPORT**

TO: Arizona State Veterinary Medical Examining Board

FROM: AM Investigative Committee: Robert Kritsberg, DVM - Chair

Christina Tran, DVM Carolyn Ratajack

Jarrod Butler, DVM - Absent

**STAFF PRESENT:** Tracy A. Riendeau, CVT – Investigations

Dawn Halbrook, Compliance Specialist Sunita Krishna, Assistant Attorney General

**RE:** Case: 19-67

Complainant(s): Karin Ashley

Respondent(s): Lori Hehn, D.V.M. (License: 4339)

#### **SUMMARY:**

Complaint Received at Board Office: 4/1/19

Committee Discussion: 6/11/19

Board IIR: 8/21/19

#### **APPLICABLE STATUTES AND RULES:**

Laws as Amended August 2018

(Lime Green); Rules as Revised September

2013 (Yellow).

On March 4, 2019, "Toby," a 13-year-old male Maltese was presented to Respondent due to concerns with the dog's back. The dog was examined and Respondent identified tenderness on palpation of dog's thoracic-lumbar area. Respondent dispensed a muscle relaxer and an NSAID and instructed Complainant to call if symptoms worsened.

On March 26, 2019, Complainant called Respondent's premise due to the dog passing large amounts of bloody stool which Complainant thought could have been a result of the medication Respondent prescribed. Complainant was advised that Respondent would not be available until the afternoon or she could take the dog to an emergency facility for immediate care.

Respondent returned Complainant's call; a verbal conflict ensued and Complainant subsequently took her dog elsewhere for care.

# Complainant was noticed and appeared.

Respondent was noticed and appeared telephonically.

The Committee reviewed medical records, testimony, and other documentation as described below:

- Complainant(s) narrative: Karin Ashley
- Respondent(s) narrative/medical record: Lori Hehn, DVM
- Witness(es) narrative: Canyon Animal Hospital staff

#### PROPOSED 'FINDINGS of FACT':

- 1. On March 4, 2019, the dog was presented to Respondent due to possible back issues. The dog was hunched over and would not lay on his side. Complainant had been giving him 80mg baby aspirin for pain once a day. Upon exam, the dog had a weight = 8.4 pounds, a temperature = 99.4 degrees, a pulse rate = 120bpm and a respiration rate = 60rpm; BCS = 5/9. Respondent noted tenderness upon palpation of the T13-L1 area, no neck pain. The dog was ambulatory and had no neurological deficits.
- 2. Respondent's suspected IVDD, pinched nerve from jumping off the bed/trauma. She discussed the results of the exam with Complainant and discharged the dog with the following:
  - a. Carprofen 25mg, 7 tablets; ¼ tablet twice a day for pain start 3/6/19 (discontinue aspirin); and
  - b. Methocarbamol 500mg, 7 tablets; 1/4 tablet orally every 8 hours for pain and muscle relaxation.
- 3. Complainant was to stop the baby aspirin and keep the dog from jumping off the bed, couch, etc. She was to return with the dog if symptoms worsened.
- 4. On March 26, 2019, Complainant stated she came home from the store around 10:00am and found the dog covered in diarrhea and pools of blood and tissue were coming from his rear end. She called Respondent's premise and was advised that Respondent was in surgery but could see the dog around 4:45pm. Complainant asked what could she do in the meantime and hospital staff only repeated that Respondent could not see the dog until that afternoon. Complainant claimed that she asked four times if she should take the dog to a hospital and only heard excuses as to why Respondent could not see the dog. According to Complainant, hospital staff finally advised her of a place to take the dog to be seen sooner and Complainant requested Respondent to call her when she was available.
- 5. Complainant stated that approximately 10 minutes later Respondent returned her call. Respondent was aggressive and angry; she repeated what hospital staff said, that she had surgeries and could not see the dog until the afternoon. Respondent told Complainant that if it would make her feel better she should take the dog to an emergency facility. Complainant relayed that Respondent did not ask how the dog was doing and only screamed about how Complainant treated her staff.
- 6. According to Respondent and her staff, when Respondent called to report the dog was ill, she was asked how the dog was doing at that moment and if he had been eating or drinking. Staff explained that Respondent had surgeries and was booked but she would check to see if they could fit her in. After speaking with Respondent, staff advised Complainant that the soonest they could fit her in was 4:45pm. Complainant asked what could she do until then; staff stated she could give the dog Pecid AD and offer boiled chicken and rice. Complainant yelled at staff that it was not a stomach issue and demanded to speak with Respondent as it was an emergency. Staff then told Complainant that if she believed it was an emergency, they recommend taking the dog to Phoenix Veterinary Referral and Emergency.
- 7. Respondent had overheard some of the conversation since staff was on the phone outside of

the surgery room. When Respondent had a moment she called Complainant; she was still home and had not gone to an emergency facility as recommended. Respondent advised that it was difficult to tell if the dog had colitis or another issue and recommended taking the dog to emergency if there was that much blood as described. Complainant agreed. Respondent stated that the conversation was fine up to that point. However, she addressed the issue of Complainant raising her voice to hospital staff. Complainant became upset and began to raise her voice at Respondent and express her dissatisfaction with hospital staff's excuses. It was agreed upon that Complainant would not be returning to the premise.

- 8. Complainant's records were faxed to another facility and the dog received treatment. Complainant stated that the dog's blood work was perfect and fecal was negative therefore she believes the medications prescribed to the dog by Respondent led to the dog's condition.
- 9. Respondent relayed that the dog was having blood from his rectum approximately 6 days after the medication should have been finished. She felt it was unlikely the carprofen caused the acute onset of this type of frank blood from the rectum as described 6 days after the medication. The medication was prescribed at a safe dose; it was less than the standard dose recommended.

#### COMMITTEE DISCUSSION:

The Committee discussed that after hearing testimony, they did not feel there was any medical mismanagement. It was unfortunate that there was poor communication between Respondent and Complainant that may have been handled better however the Committee did not feel it rose to the level of a violation.

Respondent was in surgery and could not respond timely to Complainant's concerns therefore referring to an emergency facility was appropriate.

#### COMMITTEE'S PROPOSED CONCLUSIONS of LAW:

The Committee concluded that no violations of the Veterinary Practice Act occurred.

#### COMMITTEE'S RECOMMENDED DISPOSITION:

**Motion:** It was moved and seconded the Board:

Dismiss this issue with no violation.

**Vote:** The motion was approved with a vote of 3 to 0.

The information contained in this report was obtained from the case file, which includes the complaint, the respondent's response, any consulting veterinarian or witness input, and any other sources used to gather information for the investigation.